- PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

839-1493

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY											
TOTAL CLAIMS			26 .					RATE	FEE	7	RATE	FEE										
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	E 385.00	OR	BASIC FE	770.00										
TOTAL CHARGEABLE CLAIMS			26 minus 20=		• 6		1	X\$ 9=		OR	X\$18=	108										
INDEPENDENT CLAIMS			9 minus 3 =		• /			X43=		OR	X86=	86										
	ULTIPLE DEPE	NDENT CLAIM F	PRESENT				+145=	1	OR		0 6											
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	904										
CLAIMS AS AMENDED - PART II									OTHER THAN													
_	(Column 1) (Column 2) (Column Column							SMALL	ENTITY	OR	SMALL	ENTITY										
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	. 23	Minus	- 2	6	= 0		·X\$ 9=		OR	X\$18=	0										
	Independent	* 7	Minus	PENDENT	CLANA	13		X43=		OR	X86=	600										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [+145=		OR	+290=	0.										
·								TOTAL	•	OR	TOTAL ADDIT, FEE	600										
(Column 1) (Column 2) (Column 3)																						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	•	Minus	** .	•	*	lΓ	X\$ 9=		OR	X\$18=											
	Independent	•	Minus	***		æ .	lt	X43=			X86=											
	FIRST PRESE	NTATION OF MU	ILTIPLE DEI	PENDENT (CLAIM		!	+145=		OR	+290=											
							L	TOTAL		OR	TOTAL											
								DDIT. FEE		OR A	DOTT. FEEL											
]	\	(Column 1) CLAIMS		(Columi HIGHE:		(Column 3)	_			_												
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	•	Minus	**		•	F	X\$ 9=		OR	X\$18=											
	Independent	•	Minus	- ***		•	H	X43=		.	X86=											
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-			OR	700=											
- 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=											
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																					
ORM	PTO-978 (Por In	00:								٠.												